

Revision: HCFA-PM-90- 2 (BPD)  
JANUARY 1990

OMB No.: 0938-0193

State/Territory: \_\_\_\_\_

Citation

433.137(a)  
50 FR 46652  
55 FR 1423

4.22 Third Party Liability

(a) The Medicaid agency meets all requirements of  
42 CFR 433.138 and 433.139.

433.138(f)  
52 FR 5967

(b) ATTACHMENT 4.22-A --

(1) Specifies the frequency with which the data  
exchanges required in §433.138(d)(1), (d)(3)  
and (d)(4) and the diagnosis and trauma code  
edits required in §433.138(e) are conducted;

433.138(g)(1)(ii)  
and (2)(ii)  
52 FR 5967

(2) Describes the methods the agency uses for  
meeting the followup requirements contained  
in §433.138(g)(1)(i) and (g)(2)(i);

433.138(g)(3)(i)  
and (iii)  
52 FR 5967

(3) Describes the methods the agency uses for  
following up on information obtained through  
the State motor vehicle accident report file  
data exchange required under §433.138(d)(4)(ii)  
and specifies the time frames for incorporation  
into the eligibility case file and into its  
third party data base and third party recovery  
unit of all information obtained through the  
followup that identifies legally liable third  
party resources; and

433.138(g)(4)(i)  
through (iii)  
52 FR 5967

(4) Describes the methods the agency uses for  
following up on paid claims identified under  
§433.138(e) (methods include a procedure for  
periodically identifying those trauma codes  
that yield the highest third party collections  
and giving priority to following up on those  
codes) and specifies the time frames for  
incorporation into the eligibility case file  
and into its third party data base and third  
party recovery unit of all information obtained  
through the followup that identifies legally  
liable third party resources.

TN No. 90-19  
Supersedes  
TN No. 88-3

Approval Date 4/16/91

Effective Date 7/1/90

HCFA ID: 1010P/0012P

Revision: HCFA-PM-90- 2 (BPD)  
JANUARY 1990

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433.139(b)(3)  
(ii)(A)  
55 FR 1423

17 (c) Providers are required to bill liable third parties when services covered under the plan are furnished to an individual on whose behalf child support enforcement is being carried out by the State IV-D agency.

(d) ATTACHMENT 4.22-B specifies the following:

433.139(b)(3)(ii)(C)  
55 FR 1423

(1) The method used in determining a provider's compliance with the third party billing requirements at §433.139(b)(3)(ii)(C).

433.139(f)(2)  
50 FR 46652

(2) The threshold amount or other guideline used in determining whether to seek recovery of reimbursement from a liable third party, or the process by which the agency determines that seeking recovery of reimbursement would not be cost effective.

433.139(f)(3)  
50 FR 46652

(3) The dollar amount or time period the State uses to accumulate billings from a particular liable third party in making the decision to seek recovery of reimbursement.

42 CFR 447.20  
55 FR 1423

(e) The Medicaid agency ensures that the provider furnishing a service for which a third party is liable follows the restrictions specified in 42 CFR 447.20.

TN No. 90-19  
Supersedes  
TN No. 88-3

Approval Date 4/16/91

Effective Date 7/1/90

HCFA ID: 1010P/0012P

Revision: HCFA-PM-91-8 (MB)  
October 1991

OMB No.:

State/Territory: South Carolina

Citation 4.22 (continued)

42 CFR 433.151(a)  
50 FR 46652

(f) The Medicaid agency has written cooperative agreements for the enforcement of rights to and collection of third party benefits assigned to the State as a condition of eligibility for medical assistance with at least one of the following:  
(Check as appropriate.)

☐ State title IV-D agency. The requirements of 42 CFR 433.152(b) are met.

☐ Other appropriate State agency(s)---  
\_\_\_\_\_  
\_\_\_\_\_

☐ Other appropriate agency(s) of another State---  
\_\_\_\_\_  
\_\_\_\_\_

☐ Courts and law enforcement officials.

42 CFR 433.151(b)  
50 FR 46652

(g) The Medicaid agency meets the requirements of 42 CFR 433.153 and 433.154 for making incentive payments and for distributing third party collections.

1906 of the Act

(h) The Medicaid agency specifies the guidelines used in determining the cost effectiveness of an employer-based group health plan by selecting one of the following.

☐ The Secretary's method as provided in the State Medicaid Manual, Section 3910.

☒ The State provides methods for determining cost effectiveness on Att.4.22-C.

TN. No. MA 93-011  
Supersedes  
TN No. N/A

Approval Date NOV 5 1993

Effective Date 10/01/93  
HCFA ID: 0012